

**Michigan Department of Education  
Department of Information Technology Services**

**MEIS System Security Access for Online Annual Vocational Authorization Application**  
*(A separate form must be completed for each user in your district/school)*

District Code: \_\_\_\_\_ Nonpublic School Building Number: \_\_\_\_\_

District Name \_\_\_\_\_

**Step 1.** Name of the designated individual who is authorized to use the Online Annual Vocational Authorization Application website.

_____ Name (type or print)	_____ Title
_____ e-mail address	_____ Phone Number

**Step 2.** Once an MEIS account number is obtained, please enter the following requested information:

**Designee's MEIS Account:** \_\_\_\_\_

**Step 3.** For the designated individual:

I agree to protect my user identification and password from unauthorized use. I understand all access under my user ID is my responsibility.

_____ Signature of Designee	_____ Date
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**Step 4:** For the Superintendent or Chief Operating Officer:

I attest that the above-named individual is authorized to submit the Online Annual Vocational Authorization application form to the Michigan Department of Education. I also understand that when an application is submitted for an individual through the Online Annual Vocational Authorization Application website, ***the school district/school verifies that the individual meets the appropriate work experience requirement and that no appropriately certificated teacher was available at the time of the assignment.***

_____ Signature of Superintendent/Chief Operating Officer or Designee	_____ Date
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Mail or fax this form to:

**Denise Dickenson  
Michigan Department of Education  
Office of Professional Preparation Services: Teacher Certification  
P.O. Box 30008  
Lansing, Michigan 48909  
Fax: (517) 373-0542  
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